

001 ELECTION CYCLE
PR - SS 08-01(b)

**CANDIDATE REPORT OF 2008
RECEIPTS AND DISBURSEMENTS**

Name of Candidate Joe C. Norde
Address 11084 Curtis Rd Batesville, Mo 38606 County Greene
Telephone (Work) 662 578 4300 (Home) 662 563 7751 (Fax) 662 563 7751
Contact Name Joe C. Norde Email Address _____
Office Sought Representative Political Party Democrat

☐ Check here if above is different from previous report

TYPE OF REPORT

• CHECK THE CATEGORY OF REPORT YOU ARE SUBMITTING •

- October 28, 2008 Pre-Election Report (January 1, 2008, through October 25, 2008).....Mandatory
November 18, 2008 Pre-Runoff Report (October 26, 2008, through November 15, 2008).....Runoff Candidates
✓ January 31, 2009 Annual Report (January 1, 2008, through December 31, 2008).....Mandatory
Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt or obligations.) Required to terminate reporting obligations

IMPORTANT

- (1) Periodic reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
(2) Until a candidate files a termination report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (II) and (III).
(3) The appropriate office must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.
(4) Contributions in excess of \$200 received after the reporting period but more than 48 hours before 12:01 a.m. on the day of the election must be reported by FAX or otherwise within 48 hours of the contribution. Use separate form "48 Hour Report" to report such activity.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	(itemized + non-itemized)	Total This Period	Calendar year-to-date
Total amount of contributions \$	+\$ 450.00	\$ 450.00	\$ 450.00
Total amount of disbursements \$	+\$ 3583.20	\$ 3583.20	\$ 3583.20
Total amount of cash on hand		\$ 5787.32	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Joe C. Norde
(Signature of Candidate)

Jan 30, 09
(Date)

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.
Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO:

1. Candidates for statewide, state district, multi-county and all legislative offices should return forms to Delbert Hosemann, Secretary of State, Elections Division, P.O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

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Name of Candidate or Committee

Joe C. Gordon

Reporting period

Jan 1, 08

through

Dec 31, 08

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>ATFT Mississippi Political Committee (Rocky Run)</u>	<u>12/15/08</u>	\$ <u>200.00</u>
Mailing Address <u>175 E Capital St Suite 702</u>	<u> / / </u>	\$
City, State, Zip Code <u>Jackson, MS 39201-2135</u>	<u> / / </u>	\$
Name of Employer (Required) <u>ATFT</u>	<u> / / </u>	\$
Occupation (Required) <u>Dep. - Manager</u>	Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Chock into Cash, Inc. (Gwendith Boyles)</u>	<u>12/15/08</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 550</u>	<u> / / </u>	\$
City, State, Zip Code <u>Cleveland, TN 37364-0550</u>	<u> / / </u>	\$
Name of Employer (Required) <u>Chock into Cash, Inc.</u>	<u> / / </u>	\$
Occupation (Required) <u>Manager</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u> / / </u>	\$
Mailing Address	<u> / / </u>	\$
City, State, Zip Code	<u> / / </u>	\$
Name of Employer (Required)	<u> / / </u>	\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u> / / </u>	\$
Mailing Address	<u> / / </u>	\$
City, State, Zip Code	<u> / / </u>	\$
Name of Employer (Required)	<u> / / </u>	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee

John C. Suster

Reporting period

Jan 1-08

through

Dec 31, 08

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Sterling Towers</u>	<u>2/4/08</u>	\$ <u>500.00</u>
Mailing Address		
<u>170 E Griffith St.</u>		
City, State, Zip Code		
<u>Jackson, MS</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Bank of America</u>	<u>2/9/08</u>	\$ <u>807.56</u>
Mailing Address		
<u>P.O. Box 851001</u>		
City, State, Zip Code		
<u>Dallas, TX 752851001</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Chase Card Services</u>	<u>2/18/08</u>	\$ <u>220.56</u>
Mailing Address		
<u>N.A. POX BIX 15129</u>		
City, State, Zip Code		
<u>Wilmington, Del. 19850</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Sterling Towers</u>	<u>2/21/08</u>	\$ <u>500.00</u>
Mailing Address		
<u>170 E Griffith St</u>		
City, State, Zip Code		
<u>Jackson, MS</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Wal-Mart</u>	<u>4/1/08</u>	\$ <u>322.63</u>
Mailing Address		
<u>205 Hazel-Carlson Jr.</u>		
City, State, Zip Code		
<u>Biteville, Mo 38606</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>gas</u>		
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Sterling Towers</u>	<u>3/31/08</u>	\$ <u>500.00</u>
Mailing Address		
<u>170 E Griffith St</u>		
City, State, Zip Code		
<u>Jackson, MS</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

Name of Candidate or Committee

Joe Smith

Reporting period

Jan 1, 08through Dec 31, 08

ITEMIZED DISBURSEMENTS

A. Full name <u>Entergy Utility</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>5/13/08</u>	\$ <u>23.14</u>
City, State, Zip Code <u>Jackson, ms.</u>		<u>1/1/</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
B. Full name <u>Wal-Mart</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>205 House-Carlson Dr.</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Batesville, ms 38606</u>		<u>5/19/08</u>	\$ <u>200.00</u>
Purpose of Disbursement (Optional) <u>ops</u>		Aggregate Year-to-date	\$
C. Full name <u>FIA Card Service</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u>4/28/08</u>	\$ <u>709.37</u>
City, State, Zip Code		<u>1/1/</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
D. Full name <u>Bank of America</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 851001</u>		<u>5/13/08</u>	\$ <u>157.24</u>
City, State, Zip Code <u>Dallas, TX 75285 1001</u>		<u>1/1/</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
E. Full name <u>Bank of America</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 851001</u>		<u>7/3/08</u>	\$ <u>151.70</u>
City, State, Zip Code <u>Dallas, TX 75285 1001</u>		<u>1/1/</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
F. Full name <u>Batesville Express</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>309 Hwy 6</u>		<u>12/17/08</u>	\$ <u>30.00</u>
City, State, Zip Code <u>Batesville, ms. 38606</u>		<u>1/1/</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$

Name of Candidate or Committee

Joe C. Gordon

Reporting period

Jan 1, 08

through

Dec 31, 08

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Wal-Mart	3/19/08	\$ 100.00
Mailing Address		
205 House Carlson		
City, State, Zip Code		
Batesville, MS 38606		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
gas		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$